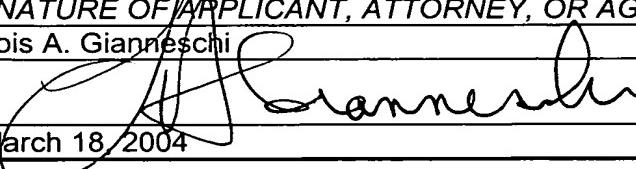
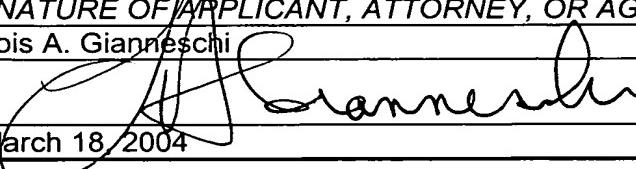
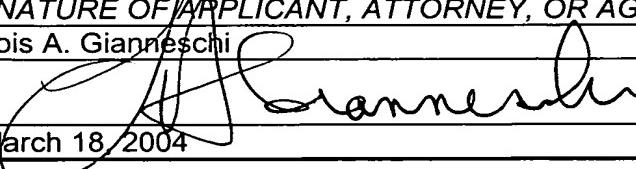


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UTILITY PATENT APPLICATION TRANSMITTAL <small>(only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No.	VTN-5054-USA-NP									
		First Inventor	Susan K. Brown-Skrobot									
		Title	Contact Lens Packages									
		Express Mail Label No.	EV138491620US									
APPLICATION ELEMENTS <i>See MPEP Chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 S.PTO 22387 10 803606 031804										
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 14] <i>(Preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive Title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure </p> <p>4. <input checked="" type="checkbox"/> Drawing(s)(35 USC 113) [Total Sheets 1]</p> <p>5. Oath or Declaration [Total Pages 3] <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Unexecuted (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). </p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>18. <input type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: , filed Prior application information: Examiner Group Art Unit:</p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p> <p>19. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number or Bar Code Label 000027777 or <input type="checkbox"/> Correspondence Address below</p> <p>Name: Philip S. Johnson, Esq. Address: Johnson & Johnson One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA</p> <p>20. TELEPHONE CONTACT Please direct all telephone calls or telefaxes to Lois A. Gianneschi at: Telephone: (732) 524-6351 Fax: (732) 524-2808</p> <p>21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">NAME</td> <td style="width: 50%;"></td> <td style="width: 25%;">Reg. No. 35519</td> </tr> <tr> <td>SIGNATURE</td> <td colspan="2"></td> </tr> <tr> <td>DATE</td> <td colspan="2">March 18, 2004</td> </tr> </table>				NAME		Reg. No. 35519	SIGNATURE			DATE	March 18, 2004	
NAME		Reg. No. 35519										
SIGNATURE												
DATE	March 18, 2004											

		Complete if Known	
FEE TRANSMITTAL		Application Number	Not Yet Assigned
		Filing Date	March 18, 2004
		First Named Inventor	Susan K. Brown-Skrobot
		Group Art Unit	Not Yet Assigned
		Examiner Name	Not Yet Assigned
		Attorney Docket Number	VTN-5054-USA-NP

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$770.00
TOTAL CLAIMS	32 - 20 =	12	x 18.00	\$ 216.00
INDEPENDENT CLAIMS	1 - 3 =	0	x 86.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$290.00	
			TOTAL FEES	\$ 986.00

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/VTN-5054-USA-NP/LG in the amount of \$986.00. Three copies of this sheet are enclosed.

- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/VTN-5054-USA-NP/LG. Three copies of this sheet are enclosed.

SUBMITTED BY:		Complete (if applicable)
Typed or Printed Name	Lois A. Giannieschi	Reg. No. 35,519
Signature		Date: March 18, 2004 Deposit Account No. 10-0750

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

Applicant: SUSAN K. BROWN-SKROBOT et al

For : CONTACT LENS PACKAGES

Express Mail Certificate

"Express Mail" mailing number: EV138491620US

Date of Deposit: March 18, 2004

I hereby certify that this complete application, including specification pages, claims, and informal drawings, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

A Combined Declaration and Power of Attorney will be submitted to the United States Patent and Trademark Office upon receipt of the U.S. Serial Number for this patent application.

Laurie Phillips

(Typed or printed name of person mailing paper or fee)

Laurie Phillips

(Signature of person mailing paper or fee)